

Best Available Copy

MULTIPLE DEPENDENT CLAIMS FREE CALCULATION SHEET (FOR USE WITH FORM 210-575)						SERIAL NO. APPLICANT(S)	FILING DATE				
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS					
IND.	DEF.	IND.	DEF.	IND.	DEF.	IND.	DEF.	IND.	DEF.	IND.	DEF.
1						51					
2						52					
3						53					
4						54					
5						55					
6						56					
7						57					
8						58					
9						59					
10						60					
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37						87					
38						88					
39						89					
40						90					
41						91					
42						92					
43						93					
44						94					
45						95					
46						96					
47						97					
48						98					
49						99					
50						100					
TOTAL IND.						TOTAL IND.					
TOTAL DEF.	32					TOTAL DEF.					
TOTAL CLAIMS	32					TOTAL CLAIMS					